



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Box ISSUE FEE  
 Commissioner for Patents  
 Washington, D.C. 20231  
**Fax** (703)746-4000

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GATEWAY, INC.  
 ATTN: SCOTT CHARLES RICHARDSON  
 610 GATEWAY DR., Y-04  
 N. SIOUX CITY, SD 57049

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

GAYLE BEKISH (Depositor's name)  
 (Signature)  
 DECEMBER 30, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/753,352	12/29/2000	Bruce E. McGarvey	257/262	9728

TITLE OF INVENTION: SYSTEM FOR ORGANIZING WIRES AND CABLES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAHL, JERRY T	2874	385-147000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no names will be printed.

1. Scott Charles Richardson  
 2. Jeffrey A. Proehl  
 3. Kaardal & Leonard

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GATEWAY, INC.

POWAY, CA

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies 2

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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0439 (enclose an extra copy of this form).

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(Authorized Signature) *Scott Charles Richardson* (Date) December 30, 2003

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**Gateway**<sup>TM</sup>**F A X**

610 Gateway Drive Mail Drop Y-04, North Sioux City, SD 57049-2000

Law Department  
Intellectual Property  
Mail Drop Y-04

Date: December 30, 2003

Pages: - 02 -  
(Including Cover)

To:	MS Issue Fee
Dept./Co.:	U.S. Patent Office
Fax:	703.746.4000
Phone:	
CC:	
From:	Scott Charles Richardson, Reg. No. 43,436
Fax:	605-232-2612
Phone:	605-232-1967
RE:	Pat. App. No. 09/753,352

**MESSAGE:**

Transmitted herewith please find:

Part B - Fee(s) Transmittal

CERTIFICATION UNDER 37 CFR §1.8: The undersigned hereby certifies that this correspondence is being transmitted, via facsimile, to the Commissioner of Patents, Washington, D.C., on the date indicated above, and to the proper facsimile telephone number, shown above.

Name: Gayle Bekish

Signature: 

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